

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
American Income Life Political Action Committee

ADDRESS (number and street) 3700 S. Stonebridge Drive
 Check if different than previously reported. (ACC) McKinney TX 75070

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00436899 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 08 / 01 / 2016 through M M / D D / Y Y Y Y Y Y 08 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Joel Scarborough

Signature of Treasurer Joel Scarborough [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 06 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Income Life Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="76868.93"/>	<input type="text" value="76868.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="77691.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1744.29"/>	<input type="text" value="14667.13"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="79436.06"/>	<input type="text" value="91536.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1500.00"/>	<input type="text" value="13600.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="77936.06"/>	<input type="text" value="77936.06"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Income Life Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1568.78	9424.47
(ii) Unitemized	175.51	5242.66
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1744.29	14667.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1744.29	14667.13
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1744.29	14667.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1744.29	14667.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	11500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	500.00	2100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1500.00	13600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1500.00	13600.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1744.29	14667.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1744.29	14667.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial)
A. Andrew Batten

Mailing Address 3702 Clinton Ave

City Cleveland State OH Zip Code 44113

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Insurance Occupation Director of Agencies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **411.06**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.7654

Amount of Each Receipt this Period
39.62

Memo Item

Full Name (Last, First, Middle Initial)
B. Mr. Domenico Bertini

Mailing Address 3194 Darlington Dr

City Oaks State CA Zip Code 91360

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Director of Agent Retention

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.7656

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mr. Denise Bowyer

Mailing Address 9312 Atlantic Ave

City North Beach State MD Zip Code 20714

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Vice President Public Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1123.84**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.7657

Amount of Each Receipt this Period
140.48

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	230.10
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial)
A. Phillip Bromagen

Mailing Address 12600 N Rockwell Avenue

City Oklahoma City	State OK	Zip Code 73145
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Income	Occupation Agent
-------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
831.39

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.7659

Amount of Each Receipt this Period
100.02

Memo Item

Full Name (Last, First, Middle Initial)
B. Rudolph Camenzind

Mailing Address 1869 Lexington Drive

City Corona	State CA	Zip Code 92880
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Income	Occupation Agent
-------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.7660

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Jennifer Cheney

Mailing Address 3609 Pine Avenue

City Waco	State TX	Zip Code 76709
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life	Occupation Agent
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.7662

Amount of Each Receipt this Period
26.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	176.02
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial)
A. Cynthia Cleary

Mailing Address 13600 E 50th St

City Kansas City State MO Zip Code 64133

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.7663

Amount of Each Receipt this Period
40.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Ms Diana Crosby

Mailing Address 729 Ceder Rock PKWY

City Waco State TX Zip Code 76712

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Sr. Vice President AA Adm & Lead Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **810.72**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.7664

Amount of Each Receipt this Period
101.34

Memo Item

Full Name (Last, First, Middle Initial)
C. Scott Dehning

Mailing Address 2142 Banyon Trail

City E. Lansing State MI Zip Code 48823

FEC ID number of contributing federal political committee. **C**

Name of Employer Amercian Income Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1140.56**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.7665

Amount of Each Receipt this Period
120.44

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	261.78
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial) A. George Farenthold		Date of Receipt 08 / 31 / 2016 Transaction ID : SA11Al.7666
Mailing Address 4501 Connecticut Ave NW Apt 418		Amount of Each Receipt this Period 30.88
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer American Income Life	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.41	

Full Name (Last, First, Middle Initial) B. Ms Debra Gamble		Date of Receipt 08 / 31 / 2016 Transaction ID : SA11Al.7667
Mailing Address 708 Wheatland		Amount of Each Receipt this Period 98.34
City McGregor	State TX	Zip Code 76657
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer American Income Life	Occupation Senior VP- Agency	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 786.72	

Full Name (Last, First, Middle Initial) C. James Gentile		Date of Receipt 08 / 31 / 2016 Transaction ID : SA11Al.7668
Mailing Address 4100 W Eldorado Pkwy		Amount of Each Receipt this Period 85.50
City McKinney	State TX	Zip Code 75070
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer American Income Life	Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 513.00	

SUBTOTAL of Receipts This Page (optional).....	214.72
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A. Frederick Hadayia Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 130 Riviera Dunes Way
#1201

City Palmetto State FL Zip Code 34221

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Director of Agencies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.7670

Amount of Each Receipt this Period
100.00

Memo Item

B. David Hall
Full Name (Last, First, Middle Initial)

Mailing Address 1301 Hill Street

City Van Alstyne State TX Zip Code 75495

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.92

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.7671

Amount of Each Receipt this Period
25.24

Memo Item

C. Murray Horowitz
Full Name (Last, First, Middle Initial)

Mailing Address 2135 McFarlin Lane

City Milton State GA Zip Code 30004

FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Occupation Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.7672

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	165.24
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

A. Elizabeth Reyer-Corley
Full Name (Last, First, Middle Initial)
Mailing Address 545 Otho Dave Road
City Lumberton State MS Zip Code 39455
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Agent
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.29**

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11AI.7681
Amount of Each Receipt this Period **41.16**
 Memo Item

B. Christian Selejan
Full Name (Last, First, Middle Initial)
Mailing Address 3609 Pink Avenue
City Waco State TX Zip Code 76709
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Specialist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **937.13**

Date of Receipt **08 / 31 / 2016**
Transaction ID : SA11AI.7682
Amount of Each Receipt this Period **118.02**
 Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	159.18
TOTAL This Period (last page this line number only).....▶	1568.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kelvin L Cobaris

Mailing Address 214 GH Washington St

City Apopka State FL Zip Code 32703

Purpose of Disbursement
Campaign Contribution

Candidate Name

Kelvin L Cobaris

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	6

Transaction ID : SB23.7690

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. Leanne Krueger-Brankey

Mailing Address P. O. Box 22

City Swarthmore State PA Zip Code 19081

Purpose of Disbursement
Campaign Contribution

Candidate Name

Leanne Krueger-Brankey

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	6

Transaction ID : SB23.7686

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	0	0	0	0	0	0	0	0	0
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1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial)

A. Keith Landry

Mailing Address 5095 Blue Flag St

City Orlando State FL Zip Code 32811

Purpose of Disbursement
Campaign Contribution

Candidate Name
Keith Landry

Office Sought: House Senate President

State: FL District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 19 / 2016

Transaction ID : SB29.7692

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

500.00

500.00